

## MEDICAID

All States have federally assisted medical assistance (Medicaid) programs.

### **Eligibility**

Either SSI program guidelines or State guidelines may be used in determining eligibility.

Criterion: Entries indicate whether Medicaid eligibility is based on SSI program standards (title XVI) or on the more restrictive State guidelines. State guidelines may not be more restrictive than the State's January 1972 medical assistance standards.

Determined by: The governmental unit responsible for determining eligibility is indicated.

### **Medically needy program**

The presence or absence of a medically needy program for SSI related populations are indicated. Statute permits States to choose either no medically needy program, a restricted program only for the TANF-related, or a program for the TANF-related and one or more of the SSI-related categories (i.e., the aged, blind, and disabled). States determine eligibility for this program.

### **Unpaid medical expenses**

Under Medicaid statute, a State must pay the unpaid medical expenses incurred for services covered under its Medicaid State plan for up to 3 months before an individual was found eligible, if the individual would have been eligible had he or she applied then.

The entry indicates whether SSA has a contractual agreement with the State to inquire about the unpaid medical expenses of SSI claimants.